

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
99 P 5545

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Phosphor for light sources and associated light source

the specification of which (check only one item below):

is attached hereto.
 was filed as United States application

Serial No. _____

on _____

and was amended

on _____ (if applicable).

was filed as PCT international application

Number PCT/DE00/02241

on July 8, 2000

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, Indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	199 34 126.5	23th July 1999	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Germany	199 51 790.8	27th October 1999	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Germany	199 63 791.1	30th December 1999	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER
35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. Application Number	U.S. Filing date	PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Carlo S. Bessone, Reg. No. 30,547; Robert F. Clark, Reg. No. 33,853; William E. Meyer, Reg. No. 30,719; and William H. McNeill, Reg. No. 24,426

Send Correspondence to: OSRAM-SYLVANIA Inc. 100 Endicott Street Danvers, MA 01923		Direct Telephone Calls to: (name and telephone number) Tel.: (508) 750-2076 Fax.: (508) 750-2045
---	--	---

FULL NAME OF INVENTOR	FAMILY NAME KUMMER	FIRST GIVEN NAME Franz	SECOND GIVEN NAME
201 RESIDENCE & CITIZENSHIP	CITY Muenchen	STATE OR FOREIGN COUNTRY Federal Republic of Germany	COUNTRY OF CITIZENSHIP Federal Republic of Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS Schleissheimer Str. 121	CITY D-80797 Muenchen	STATE & ZIP CODE/COUNTRY Federal Republic of Germany
FULL NAME OF INVENTOR	FAMILY NAME ZWASCHKA	FIRST GIVEN NAME Franz	SECOND GIVEN NAME
202 RESIDENCE & CITIZENSHIP	CITY Ismaning	STATE OR FOREIGN COUNTRY Federal Republic of Germany	COUNTRY OF CITIZENSHIP Federal Republic of Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS Egerlaenderstr. 31	CITY D-85737 Ismaning	STATE & ZIP CODE/COUNTRY Federal Republic of Germany
FULL NAME OF INVENTOR	FAMILY NAME ELLENS	FIRST GIVEN NAME Andries	SECOND GIVEN NAME
203 RESIDENCE & CITIZENSHIP	CITY Muenchen	STATE OR FOREIGN COUNTRY Federal Republic of Germany	COUNTRY OF CITIZENSHIP The Netherlands
POST OFFICE ADDRESS	POST OFFICE ADDRESS Hofangerstr. 133	CITY D-81735 Muenchen	STATE & ZIP CODE/COUNTRY Federal Republic of Germany

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 <i>Franz Kummer</i>	SIGNATURE OF INVENTOR 202 <i>Franz Zwischka</i>	SIGNATURE OF INVENTOR 203 <i>A. Ellens</i>
DATE Dec. 14, 2000	DATE Dec. 14, 2000	DATE Jan 09, 2001

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(CONTINUED)

(Includes Reference to PCT International Applications)

ATTORNEYS DOCKET NUMBER

99 P 5545

FULL NAME OF INVENTOR	FAMILY NAME DEBRAY	FIRST GIVEN NAME Alexandra	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Neumarkt	STATE OR FOREIGN COUNTRY Federal Republic of Germany	COUNTRY OF CITIZENSHIP Federal Republic of Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS Bismarckstr. 76	CITY D-90491 Nuernberg	STATE & ZIP CODE/COUNTRY Federal Republic of Germany
FULL NAME OF INVENTOR	FAMILY NAME WAITL	FIRST GIVEN NAME Guenther	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Regensburg	STATE OR FOREIGN COUNTRY Federal Republic of Germany	COUNTRY OF CITIZENSHIP Federal Republic of Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS Praschweg 3	CITY D-93049 Regensburg	STATE & ZIP CODE/COUNTRY Federal Republic of Germany
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204 <i>Alexandra DeRay</i>	SIGNATURE OF INVENTOR 205 <i>Guenther Waitl</i>	SIGNATURE OF INVENTOR 206
DATE 5.12.00	DATE 5.12.2000	DATE